

1 ROB BONTA
2 Attorney General of California
3 NORMAN D. MORRISON
Supervising Deputy Attorney General
DIANA ESQUIVEL
4 Deputy Attorney General
State Bar No. 202954
1300 I Street, Suite 125
5 P.O. Box 944255
Sacramento, CA 94244-2550
6 Telephone: (916) 210-7320
Facsimile: (916) 322-8288
7 E-mail: Diana.Esquivel@doj.ca.gov
*Attorneys for Defendants State of California, by and
through the California Highway Patrol, Blackwood,
Kee, and Rubalcava*

1 2. Exhibit B is a true copy of Dr. Jong's autopsy report produced in this
2 matter by the County Defendants. The autopsy report was produced as
3 "confidential" under the protective order in place in this case. After conferring with
4 all counsel, including with the designating party's attorney, the parties agreed that
5 the report did not need to be filed under seal.

6 3. The autopsy report is being submitting in support of Defendants' motion in
7 limine No. 5 to limit the testimony of Dr. Jong that was filed on April 17, 2025.
8 (See ECF No. 141.) I did not file the report with the motion because I was meeting
9 and conferring with counsel to ascertain whether an application to file the report
10 under seal was necessary. I however served all counsel via e-mail with Exhibit B
11 immediately after filing the motion in limine.

12 I declare under penalty of perjury under the laws of the United States and the
13 State of California that the foregoing statements are true and correct.

14

15 Dated: April 21, 2025

/s/ Diana Esquivel
Diana Esquivel

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Exhibit B

175 South Lena Road
San Bernardino, CA 92415-0037
(909) 387-2978
Fax (909) 387-2989



Chanikarn Changsri, M.D.
Chief Forensic Pathologist

Timothy Jong, M.D.
Forensic Pathologist

**San Bernardino County Sheriff's Department
Coroner Division**

Autopsy Protocol

Coroner's Case Number: 702103493

Autopsy Number: A-0540-21

Hector Javier Puga

Name: aka: Hector Javier Phea

Age: 32

Sex: Male

Time of Death: 0405 hours, February 17, 2021

Race: Hispanic

Time of Autopsy: 0915 hours, March 5, 2021

Deputy: Coleman

HISTORY OF DEATH: The following information is obtained from the deputy coroner investigative report. The decedent was a 32-year-old man who did not respond to the commands of law enforcement officers at the termination of a vehicle pursuit in the early morning hours of February 17, 2021. After a standoff, he exited his vehicle but did not follow commands. He was struck with conductive energy weapon darts but continued to ignore the commands of officers. He produced a handgun and fired at least one shot. Officers returned gunfire in his direction. The decedent attempted to flee on foot and sustained multiple gunshot wounds. He then collapsed and was handcuffed. When paramedics arrived, death was pronounced without medical intervention. A handgun and at least one fired cartridge casing were recovered next to the decedent's body.

Also refer to Coroner's Investigative Report 702103493.

GENERAL EXAMINATION: The body is identified by a tag around the right first toe as "Puga, Hector 702103493." The body is that of an unembalmed, Hispanic, adult male appearing consistent with the reported age of 32 years. The body weighs 245 pounds and measures 69 inches in length. The calculated body mass index is 36.2 kg/m² (obese).

Clothing: Included with the body are the following items of clothing:

1. Gray jeans: blood present; six defects are on the anterior right lower leg area; a defect is over the anterior left pocket; a defect is over the anterior left thigh area; two defects are over the anterior left lower leg area; a defect is above the posterior left pocket, near the belt loops; a defect is on the central upper portion, beneath the belt loops; an conductive energy weapon dart is attached to the clothing, beneath the posterior right pocket (posterior right thigh area); unfired cartridges are recovered within the anterior right pocket
2. Black cloth belt in the belt loops of the gray jeans: no obvious blood; no defects
3. Red/dark blue plaid boxers: blood present; defect on the anterior lower left area (anterior thigh area); a cluster of three defects on the posterior lateral left area; defect on the posterior left lower area (posterior thigh area); two defects on posterior right area (right buttock area)
4. Pair of white socks: blood present; right sock has two defects on the anterior lower leg area and anterior right foot area; defect on the sole of the right sock; left sock with likely wear and tear on sole

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5. Pair of gray-white-black shoes: blood present; right shoe with two defects over anterior right foot area

Evidence of Medical Intervention: Electrocardiogram pads are on both sides of the upper chest and lower abdomen.

Evidence of Postmortem Change: Rigidity is fully developed in the jaw and extremities. Lividity is pink-purple, nonblanching, and in a posterior distribution.

Evidence Collected at Autopsy: Head hair and fingernail clippings are collected by the San Bernardino County Sheriff's Department. The clothing with accompanying unfired cartridges, blood, conductive energy weapon dart (with attached wiring), and projectiles are submitted to the San Bernardino County Sheriff's Department.

Tattoos: Tattoos of unknown symbols are on the helix, antihelix, lobule, and concha of the right ear. Tattoos of unknown symbols are on the antihelix of the left ear.

The entire chest area is covered with tattoos including, but not limited to, a chain link fence, an owl, teeth, a woman's head, a face, "Jocelyn," "Yobarra," "Longo," "Serenity," "Linda," and "Mariah." A tattoo of lips is on the lower left chest. A tattoo of "PUGA" extends across the lateral right torso, both sides of the lower chest and upper abdomen, onto the lateral left torso. Tattoos of lips are on the right mid abdomen and left lower quadrant of the abdomen. A tattoo of "Dirt Digger" extends across both sides of the lower abdomen. A tattoo of a gunshot wound is on the lateral left torso. Tattoos of multiple female heads, a female head wearing a tribal style headdress, and a skull with a tribal headdress are on both sides of the upper back and mid central back. A tattoo of a phrase in a foreign language extends from the mid upper back onto the mid right back. A tattoo of possibly a gunshot wound is on the mid right back. A tattoo of "90813" extends across both sides of the lower back.

Tattoo sleeves are on both upper extremities which extend from the upper arms onto the forearms and both dorsal hands. The right upper extremity tattoo sleeve has tattoos including, but not limited to, various symbols such as a Raiders football logo, a snake, a flower, women's faces (possibly with Chicano style makeup), a woman's face with a hood, a person's face with possibly Chicano style makeup, and skulls. A tattoo of "un padre Como Delfino Juarez No Hay" is on the medial right upper arm. A tattoo of "Susana" is on the ventral right forearm. A tattoo of an unknown word is on the medial right hand. The left arm tattoo sleeve has tattoos including, but not limited to, symbols such as a bowtie, a woman's head and torso, a flower, skulls, multiple tombstones containing "RIP" and possibly names, and a ship. The left tattoo sleeve includes words such as "Ha," "RIP," "Animal," "Antonia," and "Queen Mary." A tattoo of an unclear word is on the dorsal left hand. A tattoo of bones is on the dorsal surfaces of the 2nd-5th digits of the left hand.

A tattoo of "Let's" is on the anterior right thigh. Tattoos, including, but not limited to, possibly a skull containing the letters "LES" and half of a woman's face with the other half being a skull are on the anterior and lateral right lower leg. Tattoos of possibly a bird symbol, an unknown symbol, and an alien are on the medial right lower leg. Tattoos of skulls, unclear symbols, "Longo East," and a freeway sign with "South 710" are on the posterior right lower leg. Tattoos of unknown symbols and possibly "Varrio" are on the anterior left foot. The left thigh has tattoos including, but not limited to, "Fuck," possibly "BGL," and an unclear word. Tattoos of a woman's face are on the anterolateral left lower leg. Tattoos of a woman with a tribal headdress, possibly a tribal face symbol, and possibly a temple are on the lateral and posterior left lower leg. A tattoo of "Longo" is on the anterior left foot.

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Radiographs: Full body radiographs are obtained. Five retained projectiles are noted in the torso (left upper chest, right torso, left abdomen, and left pelvis) and left thigh areas. Projectile fragments are noted in the left side of the chest, left pelvic area, left thigh, and right lower leg. A conductive energy weapon dart is noted in the right side of the torso. Both the distal right tibia and fibula are fractured.

External Examination: The body is that of a normally developed and obese medium complexioned male. The scalp is covered with short black hair. Facial hair is in a mustache and beard pattern. The ears are normally formed and without drainage. The earlobes are pierced. The irides are brown, and the bulbar and palpebral conjunctivae are free of petechiae. The sclerae are white. The nose is intact, and the nares are clean and unobstructed. A scab is on the left ala of the nose. The lips are normally formed. The teeth are natural and in good condition. The neck is symmetrical and without injury. The chest is normally formed and symmetrical. The abdomen is protuberant. A 1/4 inch scar is on the mid right abdomen. A 1/4 inch scar is on the right lower quadrant of the abdomen. The atraumatic external genitalia are those of a normal adult male with both testes palpable within the scrotum. The back is straight and symmetrical. Scars are in the pubic area. Scars, up to 3/8 inch, are on the right upper back. The anus is atraumatic.

The arms are normally formed. Multiple scars, up to 3 inches, possibly representing track marks, are on the dorsal right forearm. A scab is on the dorsal right forearm. Multiple scars, up to 3/4 inch, possibly representing track marks, are on the dorsal right hand. Black material is on the palmar aspects of both hands, the palmar surfaces of the 2nd-3rd digits of the left hand, lateral surface of the 2nd digit of the left hand, and palmar surfaces of all digits of the right hand.

The legs are normally formed and have no edema or amputations. A scab is on the anterior left thigh. Scars, up to 3/8 inch, are on the left knee and anterior left lower leg. Scabs are on the posterior right lower leg.

Description of Injuries:

There are multiple gunshot wounds. Directions will be stated with reference to the standard anatomical planes with the body measured in the horizontal position. The gunshot wounds are labeled "A" through "P" for descriptive purposes only; no sequence is implied. The puncture wounds are labeled "1" through "3" for descriptive purposes only; no sequence is implied.

Gunshot Wound of the Mid Left Back

Entry (K): A gunshot entrance wound is on the mid left back, centered 17-1/8 inches from the top of the head and 9 inches left of posterior midline. It is a 3/16 x 3/16 inch circular defect with an eccentric rim of abrasion from 4 to 5 o'clock, up to 1/8 inch at 4 o'clock. No soot or stippling is around the wound. Grey material is at the 2 o'clock edge of the wound.

Path: After perforating the skin and soft tissue, the projectile perforated the left ribcage at the posterolateral 6th left rib and 5th posterolateral left intercostal space, the lower and upper lobes of the left lung, anterior 1st left rib at the sternal junction, and terminated in the soft tissues of the left upper chest.

Exit: None

Recovery: A deformed yellow metal jacketed projectile is recovered from the soft tissues of the left upper chest (labeled as "left chest").

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Direction: The direction the projectile traveled was back to front, left to right, and upward.

Associated injuries: There is 850 ml of liquid and clotted blood in the left pleural cavity. A 2 x 2 inch ecchymosis is over the area where the projectile was recovered. The posterolateral 6th and anterior 1st left ribs are fractured. Hemorrhage is throughout the wound track.

Gunshot Wound of the Left Lower Back

Entry (M): A gunshot entrance wound is on the left lower back, centered 30 inches from the top of the head and 5-1/2 inches left of posterior midline. It is a 3/16 x 1/8 inch ovoid defect with an eccentric rim of ecchymosis from 9 to 3 o'clock. No soot or stippling is around the wound. Gray-black material is at the 9 and 2 o'clock edges of the wound.

Path: After perforating the skin and soft tissue, the projectile perforated the left ilium, large bowel, and terminated in the abdominal fat pad.

Exit: None

Recovery: A deformed yellow metal jacketed projectile is recovered in the adipose tissue of the mid abdomen (labeled as "mid abdomen").

Direction: The direction that projectile traveled was back to front, left to right, and upward.

Associated injuries: A 1-3/4 x 1-1/2 inch ecchymosis is on the mid abdomen over where the projectile is recovered. Hemorrhage is throughout the wound track.

Gunshot Wound of the Right Buttock

Entry (N): A gunshot entrance wound is on the right buttock, centered 34-1/2 inches from the top of the head and 4-1/2 inches right of posterior midline. It is an elongated defect oriented obliquely from 1 to 7 o'clock measuring 2 inches in length and 5/16 to 1/2 inch in width. An eccentric rim of abrasion is from 2 to 11 o'clock, up to 5/8 inch at 7 o'clock. A 3/16 inch tear is at 9 o'clock. Black material is in the 3 to 4 and 6 to 10 o'clock depths of the wound.

Path: After perforating the skin, the projectile perforated the soft tissues of the right buttock and terminated in the soft tissue below the skin of the right back.

Exit: None

Recovery: A minimally deformed yellow metal jacketed oxidized projectile is recovered in the soft tissues of the right mid back (labeled as "right flank").

Direction: The direction the projectile traveled was left to right and upward with no discernable front/back direction.

Associated injuries: An ecchymosis and 1/4 inch laceration (L) is over the site of recovery. Hemorrhage is throughout the wound track.

Tangential Gunshot Wound of the Anterolateral Left Thigh

A tangential gunshot wound (G) is on the anterolateral left thigh, centered 35-1/2 inches from the top of the head and 8 inches left of the anterior midline (abdominal). It is an elongated defect

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measuring 3-1/2 inches in length and 1/2 to 1 inch in width and obliquely oriented from 1 to 7 o'clock. It has an eccentric rim of abrasion from 3 to 11 o'clock, up to 3/8 inch at 6 and 3 o'clock. A 3/16 x 3/16 inch abrasion is at the 1 o'clock edge of the wound. A circumferential ecchymosis surrounds the wound. No soot or stippling is around the wound.

Gunshot Wound of the Anterior Left Thigh

Entry (H): A gunshot entrance wound is on the anterior left thigh, centered 44-1/4 inches from the top of the head and 1/2 inch left of anterior midline. It is a 1/4 x 3/16 inch defect with tears at 12 and 4 o'clock, up to 1/8 inch. A circumferential faint ecchymosis surrounds the wound. No soot or stippling is around the wound.

Path: After perforating the skin, the projectile penetrated and terminated in the soft tissues of the anterior left thigh.

Exit: None

Recovery: A minimally deformed yellow metal jacketed projectile is recovered from the soft tissues of the anterior left thigh (labeled as "left thigh").

Direction: The direction the projectile traveled was front to back, slightly left to right, and upward.

Associated injury: Hemorrhage is throughout the wound track.

Gunshot Wound of the Posterior Left Thigh

Entry (O): A gunshot entrance wound is on the posterior left thigh, centered 43-1/2 inches from the top of the head and 2 inches left of posterior midline (left popliteal fossa). It is a 5/16 x 1/4 inch ovoid defect with an eccentric rim of abrasion at 6 o'clock, 1/16 inch. It has an eccentric rim of ecchymosis from 3 to 9 o'clock. Microtears are in the 6 to 1 o'clock edges of the wound. No soot or is stippling around the wound. Black material is in the 8 to 9 o'clock depths of the wound.

Path: After perforating the skin, the projectile perforated the soft tissue of the posterior left thigh and terminated in the soft tissue of the anterior left thigh/pelvis.

Exit: None

Recovery: A deformed yellow metal jacketed projectile is recovered in the soft tissue of the anterior left thigh/pelvis (labeled as "left pelvis").

Direction: The direction the projectile traveled was back to front, left to right, and upward.

Associated injuries: Hemorrhage is throughout the wound track.

Gunshot Wound of the Lateral Left Knee

Entry (J): A gunshot entrance wound is on the lateral left knee, centered 52 inches from the top of the head and 1-3/4 inches left of anterior midline. It is a 7/8 x 1/2 inch elongated defect. A 4-1/2 inch in length and 3/16 to 3/8 inch in width abrasion extends inferiorly and obliquely past the 5 o'clock edge of the wound (towards 5 o'clock). No soot or stippling is around the wound.

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Path: After perforating the skin, the projectile penetrated the soft tissue of the anterolateral left thigh.

Exit (I): A gunshot exit wound is on the anterior left thigh, centered 45-5/8 inches from the top of the head and 1/2 inch left of the anterior midline. It is a 1-3/8 x 3/4 inch elongated defect with an eccentric rim of abrasion from 3 to 5 o'clock, up to 3/16 inch at 4 o'clock. Tears are at the 10 to 12 o'clock edges of the wound, up to 1/16 inch.

Recovery: None

Direction: The direction the projectile traveled was back to front, left to right, and upward.

Associated injuries: Hemorrhage is throughout the wound track.

Gunshot Wound of the Anterior Right Lower Leg #1

Entry (C): An entrance gunshot wound is on the anterior right lower leg, centered 62 inches from the top of the head and 1/2 inch right of anterior midline. It is a 9/16 x 1/2 inch ovoid defect with an eccentric rim of abrasion from 1 to 10 o'clock, up to 5/16 inch at 6 o'clock. Tears are at the 9, 12, and 1 o'clock edges of the wound, up to 1/4 inch at 9 o'clock. A 1/16 inch in diameter abrasion is located 13/16 inch from the center of the wound at 7 o'clock. No soot or stippling is around the wound.

Path: After perforating the skin, the projectile perforated the soft tissue of the anterior right lower leg.

Exit (A): A gunshot exit wound is on the anterior right lower leg, centered 57-3/4 inches from the top of the head and 1/2 inch left of anterior midline. It is a 5/8 inch irregular lacerated defect with an eccentric rim of ecchymosis from 12 to 3 o'clock.

Recovery: None

Direction: The direction the projectile traveled was slightly front to back, right to left, and upward.

Associated injuries: A 3/8 inch lacerated defect is over the wound track on the anterior right lower leg (B). Hemorrhage is throughout the wound track.

Gunshot Wound of the Anterior Right Lower Leg #2

Entry (D): A gunshot entrance wound is on the anterior right lower leg, centered 65-3/4 inches from the top of the head and 1-1/4 inches right of anterior midline. It is a 9/16 x 1/2 inch ovoid defect with an eccentric rim of abrasion from 5 to 9 o'clock, up to 5/16 inch at 6 o'clock. Tears are at the 9 to 1 o'clock edges of the wound, up to 1/2 inch at 12 o'clock. No soot or stippling is around the wound.

Path: After perforating the skin, the projectile perforated the soft tissue of the anterior and posterior right lower leg and right tibia and fibula.

Exit (P): A gunshot exit wound is on the posteromedial right lower leg, centered 63 inches from the top of the head and 1 inch left of posterior midline. It is a 1 inch lacerated defect.

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Recovery: None

Direction: The direction the projectile traveled was front to back, right to left, and upward.

Associated injuries: The distal right tibia and fibula are fractured. Hemorrhage is throughout the wound track.

Gunshot Wound of the Right Foot

Entry (F): An entrance gunshot wound is on the medial surface of the 5th toe of the right foot (F), centered 69 inches from the top of the head and 1-1/2 inches right of anterior midline. It is an elongated defect measuring 3/4 inch in length and 1/4 inch in width. It terminates in a 1/4 x 3/16 inch defect in the web between the 4th and 5th toes of the right foot. Black-gray material is in the wound depths. No soot or stippling is around the wound.

Path: After perforating the skin, the projectile perforated the soft tissue of the right foot.

Exit (E): A gunshot exit wound is on the anterior right foot near the junction of the 4th and 5th web space, centered 67-3/4 inches from the top of the head and 3/4 inch right of anterior midline. It is an elongated defect measuring 1-1/4 inch length and 9/16 inch in width. It is oriented from 1 to 7 o'clock with skin tears at 1 and 7 o'clock pointing superiorly, up to 7/8 inch at 7 o'clock. The skin tag at 7 o'clock points inferiorly. A circumferential ecchymosis surrounds the wound.

Recovery: None

Direction: The direction the projectile traveled was front to back, right to left, and upward.

Associated injuries: A 1/8 inch laceration with surrounding ecchymosis is on the bottom (sole) of the 4th digit (toe) of the right foot. A 3/4 inch laceration is on the anterior right foot, between the 3rd and 4th toes above the web space, 3/16 inch from the 5 o'clock edge of the exit wound (E) and 1/2 inch from the center of the exit wound (E). Hemorrhage is throughout the wound track.

Other injuries

1. A dart from a conductive energy weapon (with attached wire) is in the skin of the right upper back, located 15-1/4 inches from the top of the head and 9-1/2 inches right of posterior midline. Upon removal of the dart, there is a 1/16 inch in diameter puncture. The surrounding skin is unremarkable.
2. A 1/16 inch in diameter puncture (labeled as "1" on diagram) is on the mid right back, centered 21 inches from the top of the head and 3/4 inch right of posterior midline. The surrounding skin is unremarkable.
3. A 1/8 x 1/16 inch puncture wound (labeled as "2" on diagram) is on the mid left back, centered 23-1/2 inches from the top of the head and 2-1/4 inches left of posterior midline. The surrounding skin is unremarkable.
4. A 1/8 x 1/8 inch puncture (labeled as "3" on diagram) is on the midline lower back, centered 25-1/2 inches from the top of the head and at posterior midline. The surrounding skin is unremarkable.
5. A 3/8 x 3/8 inch abrasion is in the left eyebrow.
6. An abrasion is on the left jawline.
7. A curvilinear abrasion is on the left upper chest.
8. A 5/8 x 1/4 inch abrasion is on the posterior left trapezius.

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9. A 1-1/4 x 1/2 inch abrasion is on the proximal dorsal left forearm.
10. Abrasions are on the distal posterolateral left upper arm and lateral to the left elbow.
11. An abrasion is on the dorsal surface of the 2nd digit of the right hand, over the proximal phalange.
12. Abrasions are on the dorsal surface of the 3rd digit of the right hand, over the proximal and distal interphalangeal joints.

INTERNAL EXAMINATION:

HEAD: The scalp is free of hemorrhage. The calvarium and base of the skull are normally configured and have no fractures. The dura is intact, and there is no epidural, subdural, or subarachnoid hemorrhage. The brain weighs 1387 grams. The leptomeninges are glistening and transparent without underlying hemorrhage, exudate, or cortical contusions. The hemispheres are symmetrical and have a normal gyral pattern. The gyri and sulci are unremarkable. There is no midline shift or evidence of herniation. The vessels at the base of brain have a normal pattern of distribution, and they are unremarkable.

Sections through the cerebral hemispheres have a uniform, intact cortical ribbon and uniform white matter. The internal structures are symmetrical and without focal change. The ventricles are not enlarged, and the linings are smooth and glistening. Sections of the brainstem and cerebellum show an intact structure without focal lesions.

NECK: The tongue, strap muscles, and other anterior neck soft tissues have no hemorrhage. The hyoid bone and the cartilaginous structures of the larynx and trachea are normally formed and without fracture. The airway is unobstructed, lined by smooth, pink-tan mucosa, and contains no foreign material. The cervical vertebrae have no displacement or hypermobility.

CHEST/ABDOMINAL CAVITIES: See "description of injuries." The visceral pleura of the right lung has adhesions to the parietal pleura. Adhesions are in the right upper quadrant of the abdomen.

CARDIOVASCULAR SYSTEM: The heart weighs 371 grams and is mildly enlarged (expected heart weight for length: 321-340 grams). It has a normal shape with an unremarkable epicardium. The coronary arteries have a normal origin and distribution with right dominance. They have no atherosclerotic stenosis. The myocardium is unremarkable. The ventricles are not dilated or hypertrophied. The right ventricle is 0.4 cm thick. The left ventricle wall is 1.0 cm thick. The interventricular septum is 1.0 cm thick. The endocardium and cardiac valve leaflets are unremarkable. The atrial and ventricular septa are free of defects. The aorta has fatty streaking and is otherwise unremarkable.

RESPIRATORY TRACT: See "description of injuries." The right lung weighs 555 grams. The left lung weighs 405 grams. The left lung is collapsed but crepitant. The right lung is well-expanded and crepitant. The uninjured parenchyma is unremarkable. The right lung parenchyma is unremarkable. The bronchi contain no foreign material and have tan mucosa. The pulmonary vasculature is without thromboembolism.

GASTROINTESTINAL TRACT: See "description of injuries." The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 225 ml of light brown fluid with partially digested food. There are no visible pills or pill residue. The gastric and duodenal mucosae are intact and unremarkable. The small intestine is unremarkable to inspection. The uninjured portion of the large intestine is unremarkable to inspection. The appendix is absent. The pancreas is unremarkable.

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HEPATOBILIARY SYSTEM: The liver weighs 1557 grams. The intact capsule is smooth and glistening. The parenchyma is red-brown with moderate yellow discoloration and has a soft consistency. A 3 x 2 x 2 cm well-circumscribed mass with the appearance of normal liver parenchyma is on the superior surface of the right lobe of the liver. The parenchyma is otherwise unremarkable. The gallbladder mucosa is uniform and the wall is not thickened.

URINARY SYSTEM: The right kidney weighs 126 grams. The left kidney weighs 134 grams. The cortical surfaces are smooth. The corticomedullary structure and pelves are unremarkable. The bladder contains 300 ml of clear yellow urine. The mucosa is intact, and the bladder wall is not hypertrophied.

GENITAL SYSTEM: The prostate gland is of average size and grossly unremarkable. The testes are not examined.

HEMOLYMPHATIC SYSTEM: The spleen weighs 121 grams. The capsule is smooth and intact. The parenchyma is maroon, firm, and uniform.

ENDOCRINE SYSTEM: The thyroid, adrenal, and pituitary glands are unremarkable.

MICROBIOLOGY: A nasopharyngeal swab is submitted to the San Bernardino County Public Health Laboratory for Coronavirus testing; Result: Detected SARS-COV-2 TMA.

TOXICOLOGY: Femoral blood and urine are obtained. A basic panel is requested.

Refer to Toxicology Report

HISTOLOGIC SECTIONS: Representative sections of various organs are preserved in formalin.

Autopsy Assistant: Tamara Paris

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DIAGNOSIS:

- I. Gunshot wound of the mid left back
 - A. Entry (K): mid left back
 - B. Injuries of skin, soft tissue, ribs, and left lung
 - C. Exit: none
 - D. Recovery: deformed jacketed projectile recovered in left upper chest
 - E. Direction: back to front, left to right, upward
 - F. Associated injuries: ecchymosis over site of recovery; rib fractures; left hemothorax, 850 ml; hemorrhage throughout wound track
- II. Gunshot wound of the left lower back
 - A. Entry (M): left lower back
 - B. Injuries of skin, soft tissue, left ilium, and large bowel
 - C. Exit: none
 - D. Recovery: deformed jacketed projectile recovered in adipose tissue of mid abdomen
 - E. Direction: back to front, left to right, upward
 - F. Associated injuries: ecchymosis over site of recovery; hemorrhage throughout the wound track
- III. Gunshot wound of the right buttock
 - A. Entry (N): right buttock
 - B. Injuries of skin and soft tissue
 - C. Exit: none
 - D. Recovery: minimally deformed jacketed projectile recovered in right mid back (flank area)
 - E. Direction: left to right, upward (no discernable front/back direction)
 - F. Associated injuries: ecchymosis around and laceration (L) over site of recovery; hemorrhage throughout wound track
- IV. Tangential gunshot wound (G) of the anterolateral left thigh
- V. Gunshot wound of the anterior left thigh
 - A. Entry (H): anterior left thigh
 - B. Injuries of skin and soft tissue
 - C. Exit: none
 - D. Recovery: minimally deformed jacketed projectile recovered in soft tissue of anterior left thigh
 - E. Direction: front to back, slightly left to right, upward
 - F. Associated injury: hemorrhage throughout wound track
- VI. Gunshot wound of the posterior left thigh
 - A. Entry (O): posterior left thigh
 - B. Injuries of skin and soft tissue
 - C. Exit: none
 - D. Recovery: deformed jacketed projectile recovered in soft tissue of the anterior left thigh/pelvis
 - E. Direction: back to front, left to right, upward
 - F. Associated injury: hemorrhage throughout wound track
- VII. Gunshot wound of the lateral left knee
 - A. Entry (J): lateral left knee
 - B. Injuries of skin and soft tissue
 - C. Exit (I): anterior left thigh
 - D. Recovery: none
 - E. Direction: back to front, left to right, upward
 - F. Associated injury: hemorrhage throughout wound track
- VIII. Gunshot wound of the anterior right lower leg #1
 - A. Entry (C): anterior right lower leg

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- B. Injuries of skin and soft tissue
- C. Exit (A): anterior right lower leg
- D. Recovery: none
- E. Direction: slightly front to back, right to left, upward
- F. Associated injuries: laceration over wound track; hemorrhage throughout wound track
- IX. Gunshot wound of the anterior right lower leg #2
 - A. Entry (D): anterior right lower leg
 - B. Injuries of skin, soft tissue, and right tibia and fibula
 - C. Exit (P): posteromedial right lower leg
 - D. Recovery: none
 - E. Direction: front to back, right to left, upward
 - F. Associated injury: distal right tibia and fibula fractures; hemorrhage throughout wound track
- X. Gunshot wound of the right foot
 - A. Entry (F): medial surface of 5th toe of right foot
 - B. Injuries of skin and soft tissue
 - C. Exit (E): anterior right foot
 - D. Recovery: none
 - E. Direction: front to back, right to left, upward
 - F. Associated injuries: laceration on bottom of 4th toe of right foot (near entrance); laceration above wound track; hemorrhage throughout wound track
- XI. Conductive energy weapon dart embedded in skin of right upper back
- XII. Punctures of mid right back, mid left back, and midline lower back
- XIII. Abrasions on the left eyebrow, left jawline, left upper chest, posterior left trapezius, posterolateral left upper arm, dorsal left forearm, and dorsal surfaces of 2nd and 3rd digits of right hand
- XIV. Obesity (BMI 36.2)
 - A. Mild cardiomegaly, 371 grams
 - B. Hepatic steatosis, moderate
- XV. Toxicology: ethanol (114 mg/dL) and methamphetamine (1900 ng/mL) and metabolite amphetamine (86 ng/mL) detected; see toxicology report
- XVI. Microbiology: coronavirus detected
- XVII. Hepatic (liver) mass

PUGA/AKA: PHEA AUTOPSY CONTINUED

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A-0540-21

CAUSE OF DEATH: Gunshot wound of the back, minutes

Manner of Death: Homicide

WITNESSES PRESENT: Marcus Passow and Chad Clark; California Highway Patrol; Michelle DelRio, Jennifer McNinch, and Christopher Hermosillo; San Bernardino County Sheriff's Department

Autopsy Completed 1600 hours, March 5, 2021



Timothy Jones, M.D.
Forensic Pathologist

Date: 08/06/2021

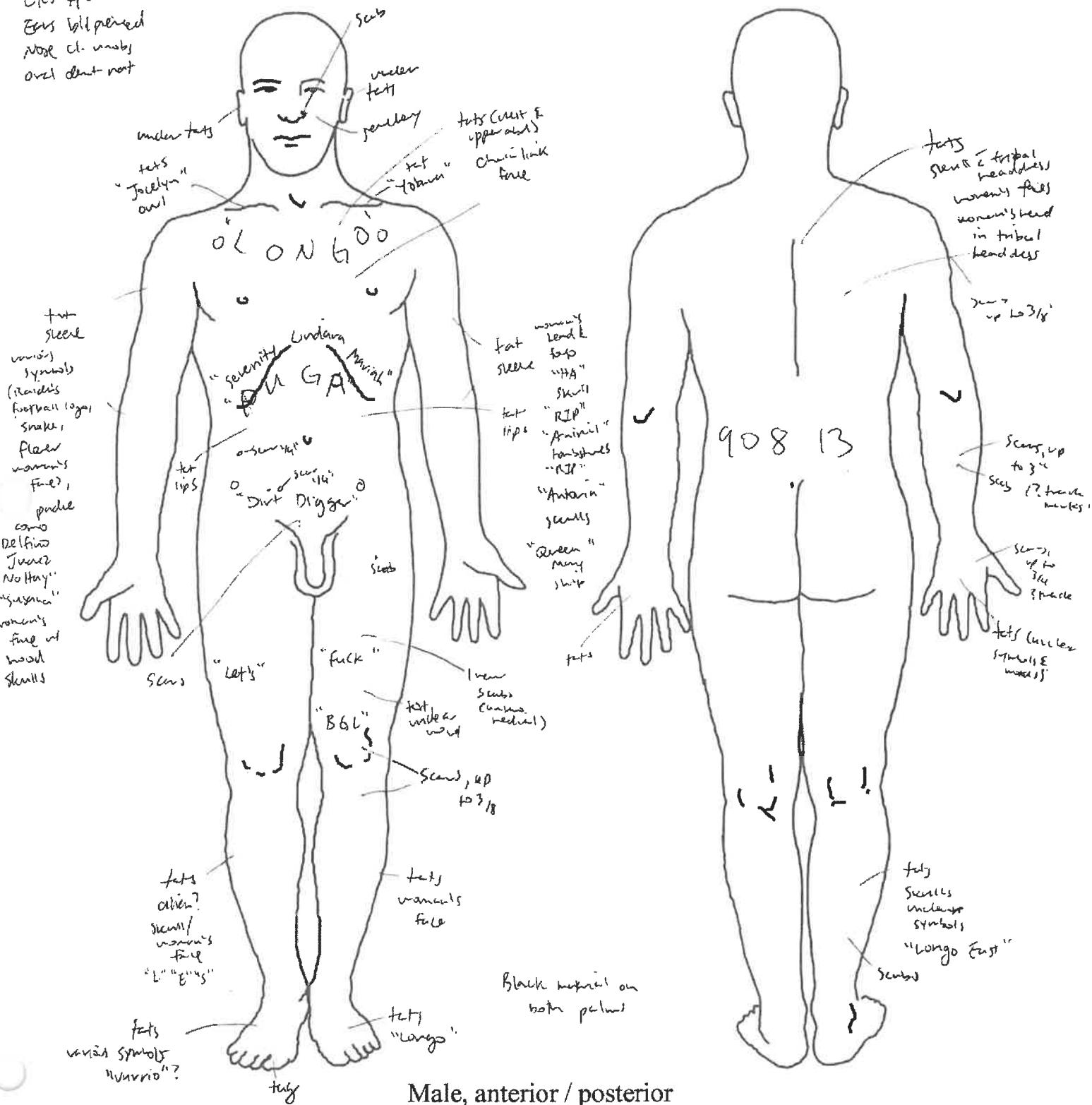
TJ:rle

San Bernardino County Sheriff/Coroner



R full
L post fixed
(C) LxL

Act in short, mistake second
Eyes open
Ears well placed
Nose clean
over dent part



Male, anterior / posterior

Name Piaget, Hector

Coroner's Case # 7QJ, 03493

Autopsy No.

540-21

Age 32

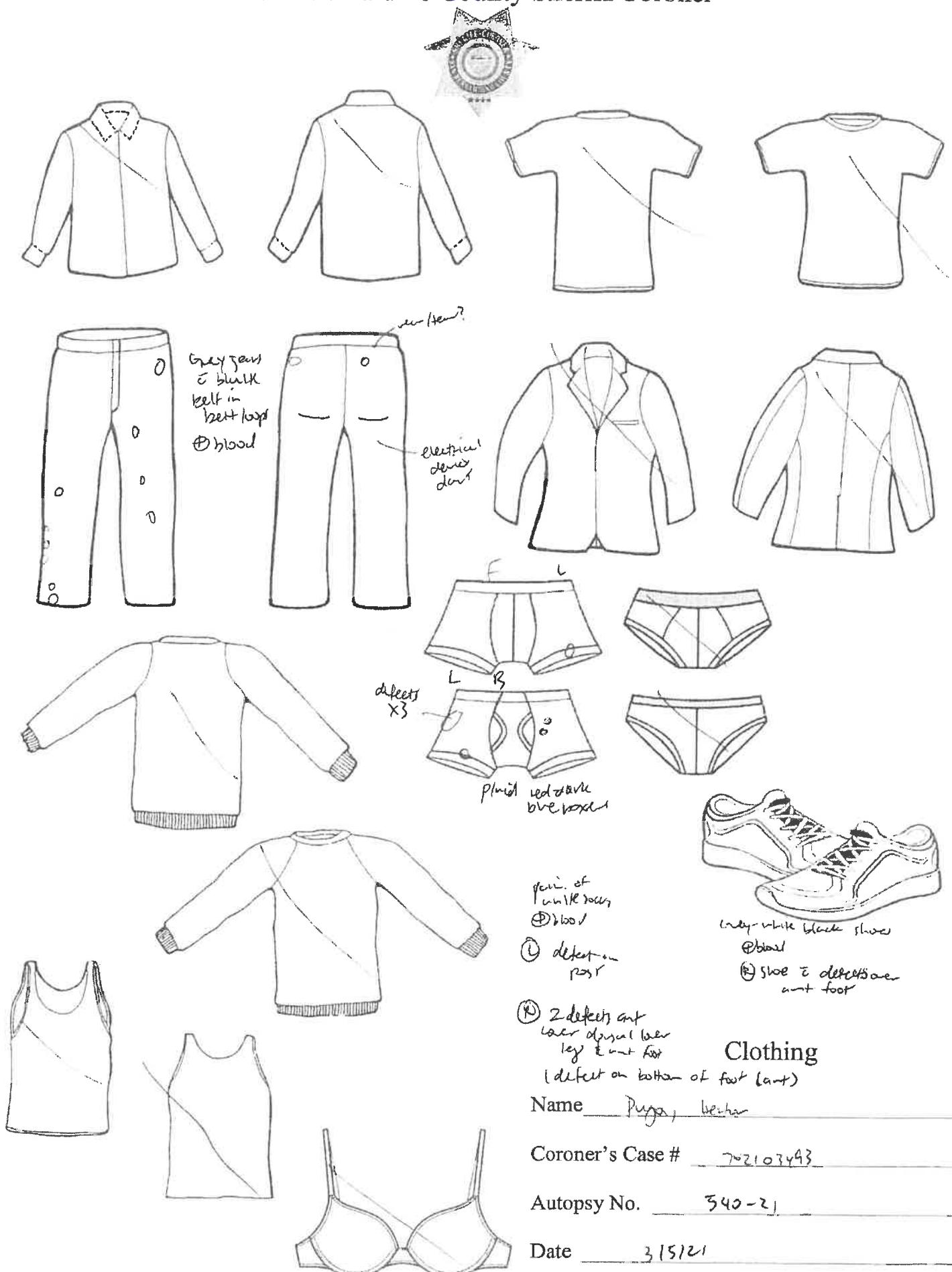
Race Hispanic

Sex Male

Date 3/5/21

COSB000846

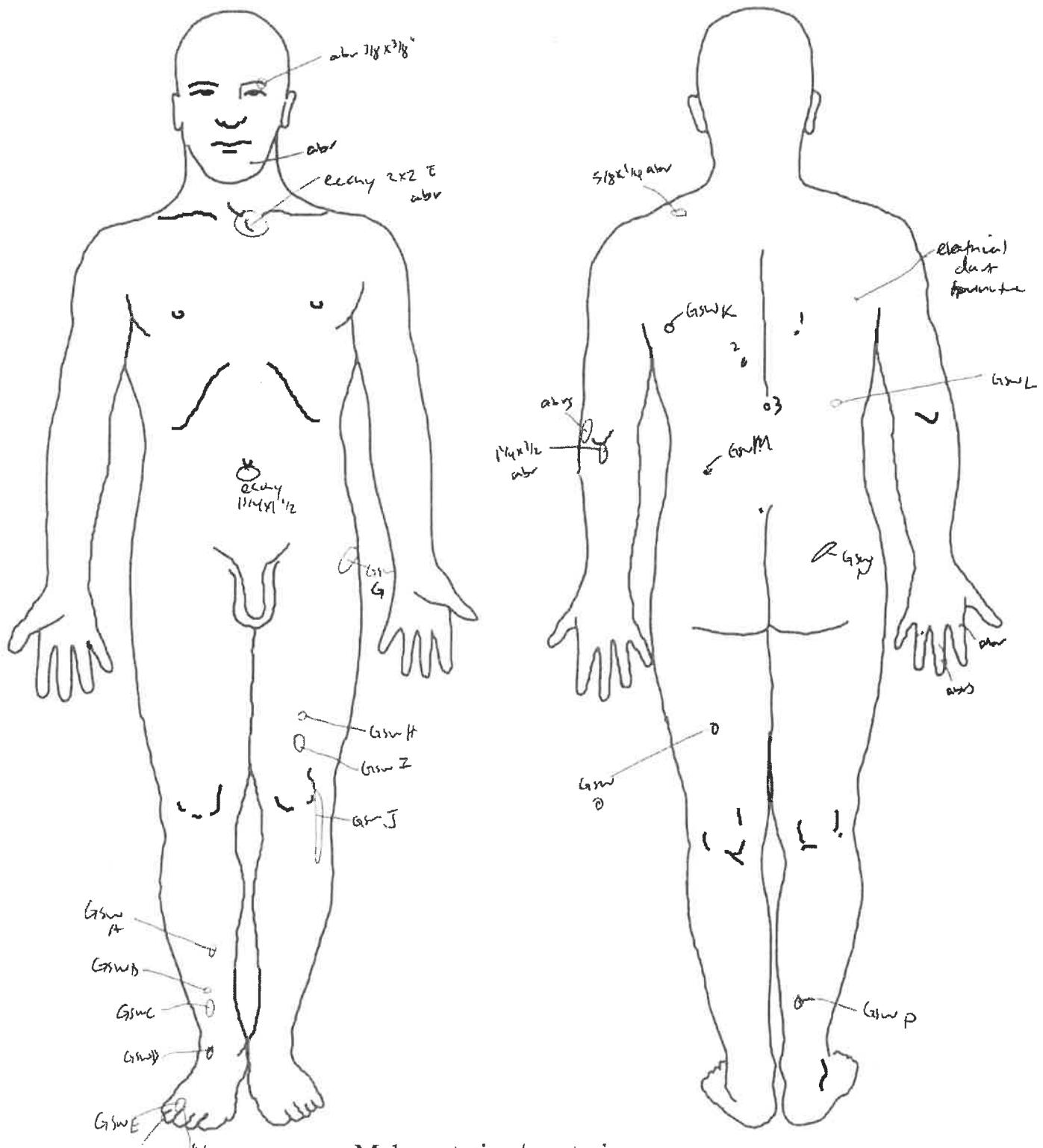
C03B000840



COSB000847

Ex. B - 14

San Bernardino County Sheriff/Coroner



Male, anterior / posterior

Jame Pugyan, Hector Coroner's Case # 702103493 Autopsy No. 540-21
Age 32 Race Hispanic Sex Male Date 3/15/21
COSB000848